

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Friends of John Boehner

ADDRESS (number and street)

7908 Cincinnati Dayton Road

Suite I

☐ Check if different
than previously
reported. (ACC)

West Chester

OH

45069-6628

2. FEC IDENTIFICATION NUMBER ▼

C C00237198

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

OH

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
05 06 2014in the
State of

OH

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 01 2014

through

M M / D D / Y Y Y Y
04 16 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Lisker

Signature of Treasurer

Lisa Lisker

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 24 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Friends of John Boehner

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	51008.50	5530153.66
(b) Total Contribution Refunds (from Line 20(d))	0.00	112595.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	51008.50	5417558.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1139217.93	5499511.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	26920.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1139217.93	5472591.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2197519.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of John Boehner

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

19095.00

1444728.15

(ii) Unitemized.....

16913.50

2538957.31

(iii) TOTAL of contributions from individuals ▶

36008.50

3983685.46

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

15000.00

1546468.20

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

51008.50

5530153.66

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

7535454.14

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

26920.63

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

2897.02

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

51008.50

13095425.45

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 89

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1139217.93	5499511.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	82345.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	30250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	112595.00
21. OTHER DISBURSEMENTS	15000.00	6423753.41
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1154217.93	12035860.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3300728.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51008.50
25. SUBTOTAL (add Line 23 and Line 24).....	3351737.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1154217.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2197519.07

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MS. BETTY T. ALLEY

A.

Mailing Address 4401 TRAYLOR STREET

City

HEPHZIBAH

State

GA

Zip Code

30815-4657

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : SA11.576793

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ARTHUR E. BAILEY

B.

Mailing Address 3232 NW GREENBRIAR TERRACE

City

PORTLAND

State

OR

Zip Code

97210-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer

ENTREPRENEUR

Occupation

ENTREPRENEUR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

Transaction ID : SA11.576738

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. NORMAN H. BAKER

C.

Mailing Address 2 EDEN PLACE

City

SHELDON

State

SC

Zip Code

29941-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : SA11.576809

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

180.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 89

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of John BoehnerA. Full Name (Last, First, Middle Initial)
MR. STEPHEN J. BLOOMMailing Address **3 HAMILL LANE**

City	State	Zip Code
CLARENDON HILLS	IL	60514-1462

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : **SA11.576813**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. VINAL BOWYERMailing Address **2539 S. WILLOW CREEK DRIVE**

City	State	Zip Code
PERU	IN	46970-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1115.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : **SA11.576762**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MELBA L. BRAYMailing Address **348 NANTUCKET DRIVE**

City	State	Zip Code
BALLWIN	MO	63011-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : **SA11.575925**

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

340.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 7 OF 89
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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 NAME OF COMMITTEE (In Full)
Friends of John Boehner

A. Full Name (Last, First, Middle Initial)
MS. MELBA L. BRAY

Mailing Address **348 NANTUCKET DRIVE**

City **BALLWIN** State **MO** Zip Code **63011-3138**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **205.00**

 Date of Receipt
 M M / D D / Y Y Y Y
04 / 01 / 2014
Transaction ID : SA11.575926

 Amount of Each Receipt this Period
20.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PINCKNEY J. BREWER

Mailing Address **P.O. BOX 148**

City **MIAMIVILLE** State **OH** Zip Code **45147-0148**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **300.00**

 Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014
Transaction ID : SA11.576493

 Amount of Each Receipt this Period
150.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN C. BRUNER

Mailing Address **1035 BERKSHIRE STREET**

City **OAK PARK** State **IL** Zip Code **60302-1369**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **350.00**

 Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014
Transaction ID : SA11.576806

 Amount of Each Receipt this Period
100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

270.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. PETER V. BRUSATI

Mailing Address 742 ROBINHOOD LANE

City

REDLANDS

State

CA

Zip Code

92373-5738

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHROP GRUMMAN

Occupation

MECHANICAL ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2014

Transaction ID : SA11.576854

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. ELOISE E. CARPENTER

Mailing Address 2595 CELINA ROAD

City

SAINT MARYS

State

OH

Zip Code

45885-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576467

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. HENRY CHAKFORD

Mailing Address 423 FIELDSTONE DRIVE

City

VENICE

State

FL

Zip Code

34292-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576466

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. FRANK B. CHAPMAN

Mailing Address 5496 CRESTWOOD DRIVE

City

MASON

State

OH

Zip Code

45040-8176

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576446

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. PEGGY CHESSER-SJOBERG

Mailing Address P.O. BOX 987

City

PHILIPPI

State

WV

Zip Code

26416-0987

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11.576920

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. MAX E. CORDLE

Mailing Address 2322 KINGSWOOD DRIVE E.

City

SPRINGFIELD

State

OH

Zip Code

45503-2302

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576480

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

240.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MRS. PATRICIA DILLER

A.

Mailing Address 2548 OHIO INDIANA STREET LINE ROAD

City

FORT RECOVERY

State

OH

Zip Code

45846-9375

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576528

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RONALD W. DOUGHERTY

B.

Mailing Address 340 LAKECREST STREET NW

City

CANTON

State

OH

Zip Code

44709-1510

FEC ID number of contributing
federal political committee.

C

Name of Employer

KRUGLIAK WILLIAMS & GRIFFITH

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576489

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. ADEL M. DURANDO

C.

Mailing Address 15862 GRIFFITH AVENUE

City

WASCO

State

CA

Zip Code

93280-9670

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Transaction ID : SA11.576819

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 11 OF 89
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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 NAME OF COMMITTEE (In Full)
Friends of John Boehner

A. Full Name (Last, First, Middle Initial) MR. LOUIS B. EICHHOLD		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 2985 KLEEMAN ROAD		Transaction ID : SA11.576432	
City CINCINNATI	State OH	Zip Code 45211-1927	Amount of Each Receipt this Period _____ 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer H.R. DIRECTION	Occupation CONSULTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

B. Full Name (Last, First, Middle Initial) MRS. WING YUNG EMERY		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 2333 KAPIOLANI BLVD. APARTMENT 2014		Transaction ID : SA11.576945	
City HONOLULU	State HI	Zip Code 96826-4444	Amount of Each Receipt this Period _____ 50.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

C. Full Name (Last, First, Middle Initial) MRS. CRISTINA M. FERNANDEZ		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address 7341 MILLER DRIVE		Transaction ID : SA11.576773	
City MIAMI	State FL	Zip Code 33155-5503	Amount of Each Receipt this Period _____ 50.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer APPOWMAIL PRESORT	Occupation BUSINESS OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 225.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 350.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. WARREN E. FRANK**A.**

Mailing Address 43575 BLAKE CREEK ROAD

City

LEONARDTOWN

State

MD

Zip Code

20650-6047

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		03		2014

Transaction ID : SA11.576387

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. NORMAN D. FULTON JR.**B.**

Mailing Address 9983 CARROUSEL COURT

City

LOVELAND

State

OH

Zip Code

45140-1854

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576525

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. SALLY A. GIPPLE**C.**

Mailing Address 1513 EMERALD BAY

City

LAGUNA BEACH

State

CA

Zip Code

92651-1235

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : SA11.576788

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. ALOYSIUS J. GOBLIRSCH

A.

Mailing Address 9738 221ST AVENUE NW

City

ELK RIVER

State

MN

Zip Code

55330-9242

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2014

Transaction ID : SA11.576869

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. THOMAS H. GRIFFITH

B.

Mailing Address 104 SCENIC DRIVE SE

City

HUNTSVILLE

State

AL

Zip Code

35801-2819

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2014

Transaction ID : SA11.576921

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. GEORGE D. GWIZD SR.

C.

Mailing Address 19 BUCKINGHAM AVENUE

City

OLD SAYBROOK

State

CT

Zip Code

06475-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2014

Transaction ID : SA11.576563

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1635.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MS. EMILY HARLOW

A.

Mailing Address 27136 MALIBU COVE COLONY DRIVE

City

MALIBU

State

CA

Zip Code

90265-4323

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : SA11.575941

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROBERT L. HARRISON

B.

Mailing Address 1910 OREGON TRAIL

City

ENGLEWOOD

State

FL

Zip Code

34224-5479

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2014

Transaction ID : SA11.576917

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROBERT L. HARRISON

C.

Mailing Address 1910 OREGON TRAIL

City

ENGLEWOOD

State

FL

Zip Code

34224-5479

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2014

Transaction ID : SA11.576917B

Amount of Each Receipt this Period

-400.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. ROBERT L. HARRISON

A.

Mailing Address 1910 OREGON TRAIL

City

ENGLEWOOD

State

FL

Zip Code

34224-5479

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11.577115

Amount of Each Receipt this Period

400.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

COL. ROBERT L. HAWKINS JR.

B.

Mailing Address 4208B WILLOWLAKE COURT

City

JEFFERSON CITY

State

MO

Zip Code

65109-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.575966

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. THOMAS HAYDEN

C.

Mailing Address 7394 SEA PINES PLACE

City

WEST CHESTER

State

OH

Zip Code

45069-6587

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576428

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. WILLIE L. HUDNELL JR.

Mailing Address 1616 SUPERIOR AVENUE

City

DAYTON

State

OH

Zip Code

45402-5745

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11.576933

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JERRY D. JORDAN

Mailing Address 795 OLD WOODS ROAD

City

COLUMBUS

State

OH

Zip Code

43235-1248

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INVESTMENT BROKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576457

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. CHARLES F. JUNG

Mailing Address 5324 LAURELRIDGE LANE

City

CINCINNATI

State

OH

Zip Code

45247-7951

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576449

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1225.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MRS. LOUISE KELLY

A.

Mailing Address 11869 CENTER ROAD

City

TRAVERSE CITY

State

MI

Zip Code

49686-8887

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

526.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : SA11.576653

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROY W. KNIPPER JR.

B.

Mailing Address 19 LAUREL LAKE DRIVE

City

HUDSON

State

OH

Zip Code

44236-2140

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576451

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. MARY GUBBELS KOEHL

C.

Mailing Address 1307 MANOR LAKE COURT

City

RICHMOND

State

TX

Zip Code

77406-7999

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

635.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : SA11.576652

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

225.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. ROBERT F. KRAKER

A.

Mailing Address 7133 CENTRAL AVENUE

City

GLENDALE

State

NY

Zip Code

11385-7366

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

Transaction ID : SA11.576840

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAULA ANN LESIAK

B.

Mailing Address 112 OLD TAVERN LANE

City

SUMMERVILLE

State

SC

Zip Code

29485-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11.576961

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAULA ANN LESIAK

C.

Mailing Address 112 OLD TAVERN LANE

City

SUMMERVILLE

State

SC

Zip Code

29485-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11.576962

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

220.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

PAULA ANN LESIAK

A.

Mailing Address 112 OLD TAVERN LANE

City

SUMMERVILLE

State

SC

Zip Code

29485-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2014

Transaction ID : SA11.576967

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

PAULA ANN LESIAK

Mailing Address 112 OLD TAVERN LANE

City

SUMMERVILLE

State

SC

Zip Code

29485-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2014

Transaction ID : SA11.576969

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PAULA ANN LESIAK

Mailing Address 112 OLD TAVERN LANE

City

SUMMERVILLE

State

SC

Zip Code

29485-8537

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2014

Transaction ID : SA11.576970

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MRS. PATRICIA MCGREGOR

A.

Mailing Address 103 23RD STREET

City

TERRE HAUTE

State

IN

Zip Code

47803-1831

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : SA11.576805

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ALVIN Z. MEISEL

B.

Mailing Address 3360 LEGACY TRACE

City

CINCINNATI

State

OH

Zip Code

45237-1728

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576479

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. RACHEL ANN MINNICH

C.

Mailing Address 320 N. MIAMI STREET

City

WEST MILTON

State

OH

Zip Code

45383-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FUNERAL DIRECTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11.576914

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. JOHN G. MITTERMAIER

Mailing Address 588 PRINCETON STREET

City

ASHVILLE

State

OH

Zip Code

43103-2518

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576508

Amount of Each Receipt this Period

45.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN C. MORLEY

Mailing Address 13485 N. PARK BOULEVARD

City

CLEVELAND HEIGHTS

State

OH

Zip Code

44118-4927

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576447

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. WARREN G. MOSERMailing Address 430 ORRVILLA DRIVE
APARTMENT 303

City

ORRVILLE

State

OH

Zip Code

44667-2433

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11.575913

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

1065.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MRS. BONNIE MOSLEY

A.

Mailing Address 7381 SAINT IVES PLACE

City

WEST CHESTER

State

OH

Zip Code

45069-4648

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576421

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. RUTH G. MYERS

B.

Mailing Address 1305 S. RIDGE DRIVE

City

CINCINNATI

State

OH

Zip Code

45224-3286

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576478

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RALPH L. NELSON

C.

Mailing Address 910 SHAWNEE ROAD

City

WAXAHACHIE

State

TX

Zip Code

75165-7103

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2014

Transaction ID : SA11.576791

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1140.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. DAVID E. RADCLIFFE

A.

Mailing Address 145 HIGH HOLBORN

City

LAKE FOREST

State

IL

Zip Code

60045-2024

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		04		2014

Transaction ID : SA11.576549

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. JOAN REILLY

B.

Mailing Address 1246 E. 32ND STREET

City

BROOKLYN

State

NY

Zip Code

11210-4743

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : SA11.576706

Amount of Each Receipt this Period

125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOSE M. RICARDO

C.

Mailing Address 1121 SW 156TH AVENUE

City

PEMBROKE PINES

State

FL

Zip Code

33027-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11.575886

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

145.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. EDWARD J. ROACH

A.

Mailing Address 308 HILL ROAD

City

HAVERTOWN

State

PA

Zip Code

19083-4833

FEC ID number of contributing
federal political committee.

C

Name of Employer

R.B.B. FUND

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		03		2014

Transaction ID : SA11.576385

Amount of Each Receipt this Period

105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRUCE W. ROGERS JR.

Mailing Address 850 SUMNER PARKWAY

APARTMENT 233

City

COPLEY

State

OH

Zip Code

44321-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576456

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRY WILLIAM ROLLINS

Mailing Address 5378 BLACK LANE

City

FAIRBORN

State

OH

Zip Code

45324-8823

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROLLINS M&S

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576477

Amount of Each Receipt this Period

500.00

CONTRIBUTION

805.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

BARBARA SAGER

A.

Mailing Address 8373 WHITE HILL LANE

City

WEST CHESTER

State

OH

Zip Code

45069-7826

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARBARA L. SAGER CO., L.P.A.

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2014

Transaction ID : SA11.576980

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. EDWARD H. SCHULZ

B.

Mailing Address 108 HOLLY HILL LANE

City

BULLARD

State

TX

Zip Code

75757-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2014

Transaction ID : SA11.576810

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DARIS E. SHAVER

C.

Mailing Address R.R. 2 BOX 285

City

PETERSTOWN

State

WV

Zip Code

24963-9711

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

435.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		04		2014

Transaction ID : SA11.576555

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

380.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MS. VIRGINIA C. SHERLIN**A.**

Mailing Address 709 WARE ROAD

City

SHELBY

State

NC

Zip Code

28152-7952

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		07		2014

Transaction ID : SA11.576679

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. VIRGINIA C. SHERLIN**B.**

Mailing Address 709 WARE ROAD

City

SHELBY

State

NC

Zip Code

28152-7952

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11.576943

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOSEPH F. SPRANKLE**C.**

Mailing Address 901 FREERS COURT

City

CHESAPEAKE

State

VA

Zip Code

23322-4260

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		03		2014

Transaction ID : SA11.576394

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

140.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. RONALD H. STANKEY

A.

Mailing Address 6940 STARSTONE DRIVE

City

RANCHO PALOS VERDES

State

CA

Zip Code

90275-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11.576932

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. CHARLES STOCKTON

B.

Mailing Address 333 MEADOW VIEW DRIVE

City

POWELL

State

OH

Zip Code

43065-9424

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROTON NURSE ATESTHETICS

Occupation

CRNA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		02		2014

Transaction ID : SA11.576511

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. GENE R. SWITZER

C.

Mailing Address 19876 TOWNSHIP ROAD 296

City

FINDLAY

State

OH

Zip Code

45840-9568

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

Transaction ID : SA11.576724

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 28 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

DR. ROBERT G. TARDIFF

A.

Mailing Address 1423 TRAPLINE COURT

City

VIENNA

State

VA

Zip Code

22182-1731

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		03		2014

Transaction ID : SA11.576392

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. THOMAS N. TAYLOR

B.

Mailing Address 25252 BRIGANTINE DRIVE

City

DANA POINT

State

CA

Zip Code

92629-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : SA11.576667

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. CON VAN TRAN

C.

Mailing Address 5614 STATE ROAD 33

City

CLERMONT

State

FL

Zip Code

34714-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11.575906

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

185.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 89
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Boehner

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C. VAN KIRK
 Mailing Address 7015 PINEMILL DRIVE

City State Zip Code
 WEST CHESTER OH 45069-4623

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MCKESSON CORP.

Occupation
 REGIONAL DIRECTOR

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 04 02 2014

Transaction ID : SA11.576530

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CHRISTINE VANOSDOL
 Mailing Address 255 25TH STREET

City State Zip Code
 LYONS OR 97358-2249

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HOMEMAKER

Occupation
 HOMEMAKER

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 305.00

Date of Receipt

M M / D D / Y Y Y Y
 04 09 2014

Transaction ID : SA11.576792

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY VON INS
 Mailing Address 3823 MILL STREAM DRIVE

City State Zip Code
 HILLIARD OH 43026-9169

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INFORMATION REQUESTED PER BEST EFFC

Occupation
 INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M / D D / Y Y Y Y
 04 02 2014

Transaction ID : SA11.576469

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1175.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 89

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MR. LEONARD E. WILLIAMS SR.

A.

Mailing Address 2510 NORFOLK ROAD

City

ORLANDO

State

FL

Zip Code

32803-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer

WAYNE DENSCH INC.

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11.576983

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC) SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

MR. LEONARD E. WILLIAMS SR.

B.

Mailing Address 2510 NORFOLK ROAD

City

ORLANDO

State

FL

Zip Code

32803-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer

WAYNE DENSCH INC.

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11.576983B

Amount of Each Receipt this Period

-2400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC) REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

MARJORIE WILLIAMS

C.

Mailing Address 2510 NORFOLK ROAD

City

ORLANDO

State

FL

Zip Code

32803-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2014

Transaction ID : SA11.577109

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

MRS. JANET L. WITHAM

Mailing Address 5807 MCCOMMAS BLVD.

APARTMENT E.

City

DALLAS

State

TX

Zip Code

75206-5735

FEC ID number of contributing
federal political committee.

C

Name of Employer

SWINGLE COLLINS & ASSOCIATES

Occupation

ACCOUNT MANAGER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2014

Transaction ID : SA11.576674

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

50.00

19095.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)

Mailing Address 4301 WILSON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22203-1867

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2014

Transaction ID : SA11.576717

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC

Mailing Address PO BOX 18254

City

WASHINGTON

State

DC

Zip Code

20036-8254

FEC ID number of contributing
federal political committee.

C C00280222

Name of Employer

Occupation

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2014

Transaction ID : SA11.576714

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. OCCIDENTAL PETROLEUM CORPORATION PAC

Mailing Address 10889 WILSHIRE BOULEVARD

City

LOS ANGELES

State

CA

Zip Code

90024-4201

FEC ID number of contributing
federal political committee.

C C00083857

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2014

Transaction ID : SA11.576716

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

10000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 89

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Boehner

Full Name (Last, First, Middle Initial)

PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE

Mailing Address 751 BROAD STREET, 14TH FLOOR

City State Zip Code
NEWARK NJ 07102-3714

FEC ID number of contributing
federal political committee.

C C00127779

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y
04 08 2014

Transaction ID : SA11.576715

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

15000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER K. BATTS

Mailing Address 2622 LAKE HOWELL LANE

City	State	Zip Code
WINTER PARK	FL	32792

Purpose of Disbursement
TRAVEL - MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

475.78

Transaction ID : SB17.715

B. CHRISTOPHER K. BATTS

Mailing Address 2622 LAKE HOWELL LANE

City	State	Zip Code
WINTER PARK	FL	32792

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

970.85

Transaction ID : SB17.716

C. MATTHEW FERGUSON

Mailing Address 7908 CINCINNATI DAYTON RD. SUITE I

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

2017.44

Transaction ID : SB17.695

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3464.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. NICHOLAS I. FLOCKEN

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

335.50

Transaction ID : SB17.705

B. CATLIN E. FRANKLIN

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

301.33

Transaction ID : SB17.704

C. CORY FRITZ

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

1274.60

Transaction ID : SB17.703

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1911.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. LAUREN GRIFFIN HAMEL

Mailing Address 320 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

377.79

Transaction ID : SB17.708

B. RYAN HEINLY

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

1209.32

Transaction ID : SB17.711

C. KENNETH C. HENNING

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

970.84

Transaction ID : SB17.701

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2557.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. GRACE HUFFMAN

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

270.18

Transaction ID : SB17.709

B. WILLIAM C. KRIEGER II

Mailing Address 6413 HOPI DRIVE

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.718

C. KEVIN MCGRANN

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

1513.37

Transaction ID : SB17.702

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9283.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. ALEXANDER MIEHLS

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

264.60

Transaction ID : SB17.710

B. GRANT H. SAUNDERS

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

522.52

Transaction ID : SB17.706

C. EMILY STIER

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

178.93

Transaction ID : SB17.707

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

966.05

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. AETNA HEALTH INC.

Mailing Address PO BOX 824

City	State	Zip Code
CAROL STREAM	IL	60132

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

7130.36

Transaction ID : SB17.750

B. AIA CORPORATION

Mailing Address 8148 SOLUTIONS CENTER

City	State	Zip Code
CHICAGO	IL	60677

Purpose of Disbursement
DONOR MEMENTO EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

5100.00

Transaction ID : SB17.694

C. ALLIANCE PRINTING & MAILING SERVICES

Mailing Address 2520 ATCO AVENUE

City	State	Zip Code
MIDDLETOWN	OH	45042

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

Amount of Each Disbursement this Period

1857.00

Transaction ID : SB17.712

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7130.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
04 / 07 / 2014

Amount of Each Disbursement this Period

102.11

Transaction ID : SB17.692

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.756523

C. AT&T

Mailing Address P.O. BOX 105068

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

151.88

Transaction ID : SB17.742

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

261.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL LISTS

Mailing Address 1252 RAMBLING RILL CIRCLE

City	State	Zip Code
STATHAM	GA	30666

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

15979.84

Transaction ID : SB17.747

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE.

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

98.34

Transaction ID : SB17.757896

C. CINCINNATI BELL TELEPHONE

Mailing Address PO BOX 748003

City	State	Zip Code
CINCINNATI	OH	45274

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

380.54

Transaction ID : SB17.763

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

16458.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. CINTAS

Mailing Address PO BOX 633842

City	State	Zip Code
CINCINNATI	OH	45263

Purpose of Disbursement
MAINTENANCE FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

104.02

Transaction ID : SB17.751

B. CLARK, SCHAEFER, HACKETT & CO.

Mailing Address 160 N. BREIEL BLVD.

City	State	Zip Code
MIDDLETOWN	OH	45042

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.683

C. CLOCKWORK SYSTEMS

Mailing Address 6001 GLOSTER ROAD

City	State	Zip Code
BETHESDA	MD	20816

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

2377.54

Transaction ID : SB17.719

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2561.56

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
DATABASE MANAGEMENT SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

10620.39

Transaction ID : SB17.761

B. COMPLIANCE CONSULTING CO OF VIRGINIA, LLC

Mailing Address PO BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.734

C. DENTAL CARE PLUS

Mailing Address PO BOX 630114

City	State	Zip Code
CINCINNATI	OH	45263

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 08 / 2014

Amount of Each Disbursement this Period

76.33

Transaction ID : SB17.696

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

13196.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address ONE CONCOURSE PKWY. STE. 300

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 02 / 2014

Amount of Each Disbursement this Period

67.99

Transaction ID : SB17.699

B. ELAVON

Mailing Address ONE CONCOURSE PKWY. STE. 300

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 02 / 2014

Amount of Each Disbursement this Period

831.51

Transaction ID : SB17.700

C. EPIPHANY PRODUCTIONS

Mailing Address 104 HUME AVENUE

City	State	Zip Code
ALEXANDRIA	VA	22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.732

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5899.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. F.E.S. FIRE & SECURITY, LLC

Mailing Address PO BOX 127

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
MIDDLETOWN	OH	45041

Amount of Each Disbursement this Period

124.00

Purpose of Disbursement
EQUIPMENT INSTALLATIONCategory/
Type

Transaction ID : SB17.757

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address P.O. BOX 371461

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
PITTSBURGH	PA	15250

Amount of Each Disbursement this Period

562.21

Purpose of Disbursement
DELIVERYCategory/
Type

Transaction ID : SB17.741

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address P.O. BOX 371461

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
PITTSBURGH	PA	15250

Amount of Each Disbursement this Period

926.50

Purpose of Disbursement
DELIVERYCategory/
Type

Transaction ID : SB17.759

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1612.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. FIRST FINANCIAL BANK

Mailing Address PO BOX 476

City	State	Zip Code
HAMILTON	OH	45012

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.679

B. FIRST FINANCIAL BANK

Mailing Address PO BOX 476

City	State	Zip Code
HAMILTON	OH	45012

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.680

C. FIRST FINANCIAL BANK

Mailing Address PO BOX 476

City	State	Zip Code
HAMILTON	OH	45012

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.681

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

36.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. FIRST FINANCIAL BANK

Mailing Address PO BOX 476

City	State	Zip Code
HAMILTON	OH	45012

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

3505.82

Transaction ID : SB17.682

B. FIRST FINANCIAL BANK

Mailing Address PO BOX 476

City	State	Zip Code
HAMILTON	OH	45012

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

56.90

Transaction ID : SB17.724587

C. FLS CONNECT, LLC

Mailing Address 7300 HUDSON BOULEVARD NSUITE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
TELEMARKETING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
04 / 14 / 2014

Amount of Each Disbursement this Period

113000.00

Transaction ID : SB17.714

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

116562.72

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. FLS CONNECT, LLC

Mailing Address 7300 HUDSON BOULEVARD NSUITE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

4030.32

Transaction ID : SB17.725

B. FLS CONNECT, LLC

Mailing Address 7300 HUDSON BOULEVARD NSUITE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

1750.00

Transaction ID : SB17.760

C. GREENER AND HOOK

Mailing Address 2101 WILSON BLVD. SUITE 204

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

221700.00

Transaction ID : SB17.697

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

227480.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. GREENER AND HOOK

Mailing Address 2101 WILSON BLVD. SUITE 204

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
MEDIA

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

2014	145700.00
------	-----------

Transaction ID : SB17.698

B. KONICA MINOLTA PREMIER

Mailing Address PO BOX 41602

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
PHILADELPHIA	PA	19101

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

2014	969.01
------	--------

Transaction ID : SB17.678

C. MAIL AMERICA COMMUNICATIONS

Mailing Address 1174 ELKTON FARM RD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
FOREST	VA	24551

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

2014	60732.73
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Transaction ID : SB17.722

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

207401.74

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MAIL AMERICA COMMUNICATIONS

Mailing Address 1174 ELKTON FARM RD.

City	State	Zip Code
FOREST	VA	24551

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

38619.46

Transaction ID : SB17.749

B. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE SUITE 104

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

27688.16

Transaction ID : SB17.713

C. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE SUITE 104

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

160455.81

Transaction ID : SB17.744

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

226763.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE SUITE 104

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

40412.40

Transaction ID : SB17.745

B. MASTERCARD

Mailing Address PO BOX 42070

City	State	Zip Code
MIDDLETOWN	OH	45042

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

246.29

Transaction ID : SB17.731

NO SUB-VENDORS REACHED THE ITEMIZATION THRESHOLD

C. MASTERCARD

Mailing Address PO BOX 42070

City	State	Zip Code
MIDDLETOWN	OH	45042

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

26120.46

Transaction ID : SB17.762

SUB-VENDORS REACHING THE ITEMIZATION THRESHOLD ARE ITEMIZED BELOW

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

66779.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. 1-800 FLOWERS.COMMailing Address ONE OLD COUNTRY ROAD
STE 500

City CARLE PLACE State NY Zip Code 11514

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

210.48

Transaction ID : SB17.764

[MEMO ITEM]

B. 1-800 FLOWERS.COMMailing Address ONE OLD COUNTRY ROAD
STE 500

City CARLE PLACE State NY Zip Code 11514

Purpose of Disbursement
FLORAL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

213.48

Transaction ID : SB17.765

[MEMO ITEM]

C. 123TOGETHER.COM

Mailing Address 309 WAVERLY OAKS RD

City WALTHAM State MA Zip Code 02452

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

293.91

Transaction ID : SB17.763E

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. BEST BUY

Mailing Address 3435 PRINCETON ROAD

City State Zip Code
HAMILTON OH 45011

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 16 2014

Amount of Each Disbursement this Period

830.68

Transaction ID : SB17.766

[MEMO ITEM]

B. BEST BUY

Mailing Address 3435 PRINCETON ROAD

City State Zip Code
HAMILTON OH 45011

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 16 2014

Amount of Each Disbursement this Period

5645.48

Transaction ID : SB17.767

[MEMO ITEM]

C. BEST BUY

Mailing Address 3435 PRINCETON ROAD

City State Zip Code
HAMILTON OH 45011

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 16 2014

Amount of Each Disbursement this Period

63.89

Transaction ID : SB17.768

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. CORK & BARREL

Mailing Address 7950 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

102.20

Transaction ID : SB17.769

[MEMO ITEM]

B. CORK & BARREL

Mailing Address 7950 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

26.59

Transaction ID : SB17.770

[MEMO ITEM]

C. CORK & BARREL

Mailing Address 7950 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

2.35

Transaction ID : SB17.771

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1601 WILLOW ROAD

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

251.92

Transaction ID : SB17.772

[MEMO ITEM]

B. FACEBOOK

Mailing Address 1601 WILLOW ROAD

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

507.98

Transaction ID : SB17.773

[MEMO ITEM]

C. GOOGLE.COM

Mailing Address 1600 AMPHITHEATRE PKWY

City	State	Zip Code
MOUNTAIN VIEW	CA	94043

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.774

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

67.72

Transaction ID : SB17.775

[MEMO ITEM]

B. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

42.69

Transaction ID : SB17.776

[MEMO ITEM]

C. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

60.46

Transaction ID : SB17.777

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

42.50

Transaction ID : SB17.778

[MEMO ITEM]

B. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

83.00

Transaction ID : SB17.779

[MEMO ITEM]

C. HILL STATION BAR & GRILL

Mailing Address 7838 CINCINNATI DAYTON RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

35.23

Transaction ID : SB17.780

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. JAGS STEAK & SEAFOOD

Mailing Address 5980 WEST CHESTER RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

1403.21

Transaction ID : SB17.784

[MEMO ITEM]

B. JAGS STEAK & SEAFOOD

Mailing Address 5980 WEST CHESTER RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

427.46

Transaction ID : SB17.785

[MEMO ITEM]

C. JAGS STEAK & SEAFOOD

Mailing Address 5980 WEST CHESTER RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

320.35

Transaction ID : SB17.786

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. JAGS STEAK & SEAFOOD

Mailing Address 5980 WEST CHESTER RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

314.98

Transaction ID : SB17.787

[MEMO ITEM]

B. KROGER

Mailing Address 428 OXFORD STATE RD

City	State	Zip Code
MIDDLETOWN	OH	45044

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

12.74

Transaction ID : SB17.788

[MEMO ITEM]

C. KROGER

Mailing Address 428 OXFORD STATE RD

City	State	Zip Code
MIDDLETOWN	OH	45044

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

29.33

Transaction ID : SB17.789

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. KROGER

Mailing Address 428 OXFORD STATE RD

City	State	Zip Code
MIDDLETOWN	OH	45044

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

205.95

Transaction ID : SB17.790

[MEMO ITEM]

B. KROGER

Mailing Address 428 OXFORD STATE RD

City	State	Zip Code
MIDDLETOWN	OH	45044

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

29.03

Transaction ID : SB17.791

[MEMO ITEM]

C. KROGER

Mailing Address 428 OXFORD STATE RD

City	State	Zip Code
MIDDLETOWN	OH	45044

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

270.74

Transaction ID : SB17.792

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

57.78

Transaction ID : SB17.793

[MEMO ITEM]

B. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

29.02

Transaction ID : SB17.794

[MEMO ITEM]

C. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

30.01

Transaction ID : SB17.795

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

45.01

Transaction ID : SB17.796

[MEMO ITEM]

B. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

55.00

Transaction ID : SB17.797

[MEMO ITEM]

C. MARATHON FOOD MART

Mailing Address 7363 KINGSGATE WAY

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

52.10

Transaction ID : SB17.798

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MEIJER

Mailing Address 7390 TYLERSVILLE RD

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

213.58

Transaction ID : SB17.799

[MEMO ITEM]

B. MICROSOFT

Mailing Address 1 MICROSOFT WAY

City	State	Zip Code
REDMOND	WA	98052

Purpose of Disbursement
SOFTWARE PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

234.29

Transaction ID : SB17.800

[MEMO ITEM]

C. MIKE ALBERT DIRECT RENT

Mailing Address 10381 EVENDALE DRIVE

City	State	Zip Code
CINCINNATI	OH	45241

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

477.17

Transaction ID : SB17.801

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MITCHELLS FISH MARKET

Mailing Address 9456 WATER FRONT DR

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

325.39

Transaction ID : SB17.802

[MEMO ITEM]

B. MONTGOMERY INN CATERING

Mailing Address 925 RIVERSIDE DR

City	State	Zip Code
CINCINNATI	OH	45202

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

637.75

Transaction ID : SB17.803

[MEMO ITEM]

C. OFFICE DEPOT

Mailing Address 7610 VOICE OF AMERICA CENTRE DR

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

62.80

Transaction ID : SB17.804

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 7610 VOICE OF AMERICA CENTRE DR

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

237.52

Transaction ID : SB17.805

[MEMO ITEM]

B. OFFICE DEPOT

Mailing Address 7610 VOICE OF AMERICA CENTRE DR

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

747.53

Transaction ID : SB17.806

[MEMO ITEM]

C. OFFICE DEPOT

Mailing Address 7610 VOICE OF AMERICA CENTRE DR

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

553.77

Transaction ID : SB17.807

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SAMS CLUB

Mailing Address 800 KEMPER COMMONS CIRCLE

City	State	Zip Code
SPRINGDALE	OH	45246

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

256.09

Transaction ID : SB17.808

[MEMO ITEM]

B. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

52.30

Transaction ID : SB17.809

[MEMO ITEM]

C. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

47.20

Transaction ID : SB17.810

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.811

[MEMO ITEM]

B. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.812

[MEMO ITEM]

C. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.813

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.814

[MEMO ITEM]

B. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

51.03

Transaction ID : SB17.815

[MEMO ITEM]

C. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.816

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.817

[MEMO ITEM]

B. SPEEDWAY

Mailing Address 9738 PRINCETON GLENDALE RD

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
CREDIT-TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

-25.00

Transaction ID : SB17.818

[MEMO ITEM]

C. THE CAROLINE

Mailing Address 5 S MARKET ST

City	State	Zip Code
TROY	OH	45373

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

563.76

Transaction ID : SB17.819

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. THE CAROLINE

Mailing Address 5 S MARKET ST

City	State	Zip Code
TROY	OH	45373

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.820

[MEMO ITEM]

B. THE CAROLINE

Mailing Address 5 S MARKET ST

City	State	Zip Code
TROY	OH	45373

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.821

[MEMO ITEM]

c. USPS

Mailing Address 1050 AIRPORT ROAD

City	State	Zip Code
WEST CHESTER	OH	19380

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

490.00

Transaction ID : SB17.822

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1050 AIRPORT ROAD

City	State	Zip Code
WEST CHESTER	OH	19380

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

4949.00

Transaction ID : SB17.823

[MEMO ITEM]

B. MERCER COUNTY REPUBLICAN PARTY

Mailing Address 6951 OREGON ROAD

City	State	Zip Code
CELINA	OH	45822

Purpose of Disbursement
EVENT REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.693

C. MIAMI COUNTY REPUBLICAN MENS CLUB

Mailing Address PO BOX 978

City	State	Zip Code
TROY	OH	45373

Purpose of Disbursement
EVENT REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.726

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

415.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. MICRO SOLUTIONS, LLC

Mailing Address 6462 BRITTANY LANE

City	State	Zip Code
LOVELAND	OH	45140

Purpose of Disbursement
COMPUTER SERVICES/SUPPORT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

320.25

Transaction ID : SB17.733

B. NJI MEDIA

Mailing Address 103 SOUTH UNION STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
MEDIA/DATA MANAGEMENT SVCS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

9866.66

Transaction ID : SB17.752

C. OCCASIONS CATERERS

Mailing Address 655 TAYLOR STREET, NE

City	State	Zip Code
WASHINGTON	DC	20017

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

35264.13

Transaction ID : SB17.690

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

45451.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

17.00

Transaction ID : sb17.px01

B. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

1.17

Transaction ID : sb17.px02

C. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2014

Amount of Each Disbursement this Period

8.89

Transaction ID : sb17.px03

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

27.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2014

Amount of Each Disbursement this Period

23.82

Transaction ID : sb17.px04

B. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

Amount of Each Disbursement this Period

2.56

Transaction ID : sb17.px05

C. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2014

Amount of Each Disbursement this Period

2.13

Transaction ID : sb17.px06

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

23.82

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

2.13

Transaction ID : sb17.px07

B. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

19.14

Transaction ID : sb17.px08

C. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

23.38

Transaction ID : sb17.px09

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

44.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND ST. 1ST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
ONLINE PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

2.13

Transaction ID : sb17.px10

B. PREFERRED COMMUNICATIONS

Mailing Address 815 KING STREET, SUITE 209

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

320.00

Transaction ID : SB17.740

C. PROSOURCE

Mailing Address 4720 GLENDALE MILFORD ROAD

City	State	Zip Code
CINCINNATI	OH	45242

Purpose of Disbursement
OFFICE EQUIPMENT RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

1435.04

Transaction ID : SB17.743

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1757.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. REED COPYWRITING

Mailing Address 131 GLYN TAWEL DRIVE

City	State	Zip Code
GRANVILLE	OH	43023

Purpose of Disbursement
COPYWRITING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.753

B. RESPONSE AMERICA

Mailing Address 211 NORTH UNION ST. STE. 200

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

20060.30

Transaction ID : SB17.720

C. RESPONSE AMERICA

Mailing Address 211 NORTH UNION ST. STE. 200

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

36228.95

Transaction ID : SB17.748

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

56789.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SAN-STE PROPERTIES LLC

Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
RENT

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.717

B. SCM ASSOCIATES, INC.

Mailing Address P.O. BOX 254

City	State	Zip Code
DUBLIN	NH	03444

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

3787.93

Transaction ID : SB17.738

C. SCM ASSOCIATES, INC.

Mailing Address P.O. BOX 254

City	State	Zip Code
DUBLIN	NH	03444

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

10750.98

Transaction ID : SB17.756

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17038.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 89

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. SPELNA, INC.

Mailing Address 225 INDUSTRIAL COURT

City	State	Zip Code
FREDERICKSBURG	VA	22408

Purpose of Disbursement
DOCUMENT HANDLING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

7	2	7	.	1	6
---	---	---	---	---	---

Transaction ID : SB17.739

B. STRATEGIC FUNDRAISING, INC.

Mailing Address 2625 MOMENTUM PLACE

City	State	Zip Code
CHICAGO	IL	60689

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

1	1	2	6	.	8	0
---	---	---	---	---	---	---

Transaction ID : SB17.729

C. STRATEGIC MARKETING AND MAILING INC

Mailing Address 3002 NORTH APOLLO DRIVE

City	State	Zip Code
CHAMPAIGN	IL	61822

Purpose of Disbursement
DIRECT MAIL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

7	0	5	5	7	.	9	1
---	---	---	---	---	---	---	---

Transaction ID : SB17.746

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7	1	7	1	.	8	7
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. STRATEGIC FUNDRAISING, INC.

Mailing Address 2625 MOMENTUM PLACE

City	State	Zip Code
CHICAGO	IL	60689

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.754

B. THE TARRANCE GROUP, INC.

Mailing Address 201 N. UNION ST., STE 410

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

13644.00

Transaction ID : SB17.737

C. TIME WARNER CABLE

Mailing Address 11252 CORNELL PARK DR.

City	State	Zip Code
BLUE ASH	OH	45242

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

419.41

Transaction ID : SB17.730

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14113.41

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

175.36

Transaction ID : SB17.6332214

B. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

104.18

Transaction ID : SB17.684

C. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

31.97

Transaction ID : SB17.685

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

175.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2014

Amount of Each Disbursement this Period

5.91

Transaction ID : SB17.686

B. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2014

Amount of Each Disbursement this Period

16.65

Transaction ID : SB17.686A

C. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2014

Amount of Each Disbursement this Period

19.87

Transaction ID : SB17.686B

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

42.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2014

Amount of Each Disbursement this Period

19.87

Transaction ID : SB17.686C

B. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

57.46

Transaction ID : SB17.687

C. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

38.67

Transaction ID : SB17.688

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

116.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2014

Amount of Each Disbursement this Period

61.21

Transaction ID : SB17.689

B. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

Amount of Each Disbursement this Period

7.52

Transaction ID : SB17.691

C. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

685.00

Transaction ID : SB17.723

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

753.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Mailing Address 8730 CINCINNATI DAYTON RD.

City	State	Zip Code
WEST CHESTER	OH	45069

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2014

Amount of Each Disbursement this Period

49.93

Transaction ID : SB17.9896636

B. VERIZON

Mailing Address PO BOX 660720

City	State	Zip Code
DALLAS	TX	75266

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

287.68

Transaction ID : SB17.724

C. VIP PRINTING

Mailing Address 4836 DUFF DRIVE, SUITE A

City	State	Zip Code
WEST CHESTER	OH	45246

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

2900.05

Transaction ID : SB17.735

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3237.66

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of John Boehner

Full Name (Last, First, Middle Initial)

A. VIP PRINTING

Mailing Address 4836 DUFF DRIVE, SUITE A

City WEST CHESTER State OH Zip Code 45246

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period

1769.43

Transaction ID : SB17.758

B. WEDOWEBSTUFF.COM

Mailing Address 270 COMPTON RIDGE DR.

City CINCINNATI State OH Zip Code 45215

Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

280.00

Transaction ID : SB17.736

C. WILAND DIRECT, INC.

Mailing Address 6309 MONARCH PARK PLACE, SUITE 201

City LONGMONT State CO Zip Code 80503

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period

5143.22

Transaction ID : SB17.721

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7192.65

